

# In the Beginning...

## Vulnerability Index (VI)

Built upon the research of Drs. O'Connell and Hwang regarding medical vulnerability and risk of mortality within homeless populations

Made popular first through Common Ground and then the 100K Homes Campaign

In place across more than 200 communities participating in the 100K Homes Campaign

## Service Prioritization Decision Assistance Tool (SPDAT)

Built upon review of 13 existing tools, client interviews, case manager interviews, academic panel, and 200+ published journal articles + other government reports + tools

Made popular through coordinated access and common assessment approaches for Housing First programs

In place in over 145 communities focused on prioritization for Housing First and Rapid Re-Housing programs, and/or system prioritization.

# Some Differences

## VI

Medical vulnerability (risk of morbidity) amongst chronically homeless people of primary concern.

Administered primarily as a survey, often through street-based registry weeks.

Doesn't prioritize, especially for those who need a moderate intervention.

Doesn't have a version specifically for families.

## SPDAT

Medical vulnerability is an element, but considered along with other proven risk factors.

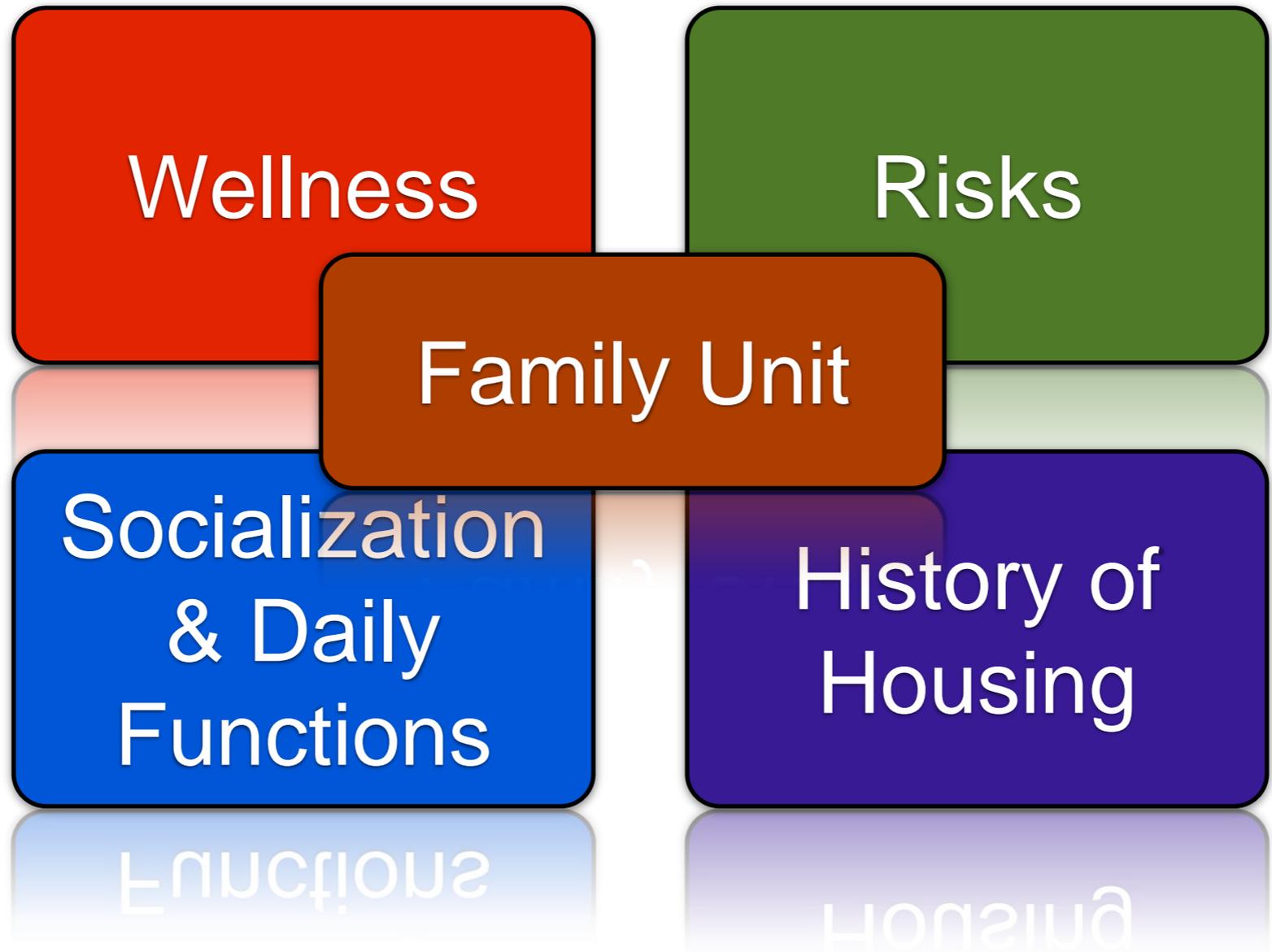
Administered primarily as an assessment for intake to a support and housing program.

Designed to prioritize for all types of housing interventions, including when no intervention is recommended.

Has a version specifically for families.

# The Merger

- Combining the VI with the SPDAT began early in 2013.
- VI elements meshed with other SPDAT prescreen components.
- Survey tested in California, Louisiana, Michigan and Alberta in May and June 2013.
- Release of first draft at NAEH Conference.
- Further tested and revised with amended tool released October 2013.
- Built into all major HMIS 2014.



Wellness

Mental Health &  
Wellness and  
Cognitive  
Functioning

Physical Health  
& Wellness

Substance Use

Medication

Experience of  
Abuse/ Trauma

Function  
Cognitive

Function

## D. WELLNESS

QUESTIONS					
<b>If Does Not Go For Care, score 1.</b>		RESPONSE		Prescreen Score	
21. Where do you usually go for healthcare or when you're not feeling well?		<input type="checkbox"/> Hospital <input type="checkbox"/> Clinic <input type="checkbox"/> VA <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Does not go for care			
<b>For EACH YES response in questions 22 through 25 (Medical Conditions), score 1.</b>					
<b>Do you have now, have you ever had, or has a healthcare provider ever told you that you have any of the following medical conditions:</b>		YES	NO	REFUSED	Medical Conditions
22. Kidney disease/End Stage Renal Disease or Dialysis		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. History of frostbite, Hypothermia, or Immersion Foot		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Liver disease, Cirrhosis, or End-Stage Liver Disease		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. HIV+/AIDS		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>If YES to any of the conditions in questions 26 to 34, then mark "X" in Other Medical Condition column.</b>		YES	NO	REFUSED	Other Medical Conditions
26. History of Heat Stroke/Heat Exhaustion		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Heart disease, Arrhythmia, or Irregular Heartbeat		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Emphysema		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Diabetes		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. Asthma		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Cancer		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Hepatitis C		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Tuberculosis		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>OBSERVATION ONLY – DO NOT ASK:</b>		<input type="checkbox"/>	<input type="checkbox"/>		
34. Surveyor, do you observe signs or symptoms of a serious health condition?		<input type="checkbox"/>	<input type="checkbox"/>		

If any response is YES in questions 35 through 41, score 1 in the Substance Use column.	YES	NO	REFUSED	Substance Use
35. Have you ever had problematic drug or alcohol use, abused drugs or alcohol, or told you do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Have you consumed alcohol and/or drugs almost every day or every day for the past month?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. Have you ever used injection drugs or shots in the last six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Have you ever been treated for drug or alcohol problems and returned to drinking or using drugs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Have you used non-beverage alcohol like cough syrup, mouthwash, rubbing alcohol, cooking wine, or anything like that in the past six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Have you blacked out because of your alcohol or drug use in the past month?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>OBSERVATION ONLY – DO NOT ASK:</b> 41. Surveyor, do you observe signs or symptoms or problematic alcohol or drug abuse?	<input type="checkbox"/>	<input type="checkbox"/>		

If any response is YES in questions 42 through 48, score 1 in the Mental Health Column.	YES	NO	REFUSED	Mental Health
42. Ever been taken to a hospital against your will for a mental health reason?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43. Gone to the emergency room because you weren't feeling 100% well emotionally or because of your nerves?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Spoken with a psychiatrist, psychologist or other mental health professional in the last six months because of your mental health – whether that was voluntary or because someone insisted that you do so?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45. Had a serious brain injury or head trauma?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Ever been told you have a learning disability or developmental disability?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47. Do you have any problems concentrating and/or remembering things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>OBSERVATION ONLY – DO NOT ASK:</b> 48. Surveyor, do you detect signs or symptoms of severe, persistent mental illness or severely compromised cognitive functioning?	<input type="checkbox"/>	<input type="checkbox"/>		
<i>If the Substance Use score is 1 AND the Mental Health score is 1 AND the Medical Condition score is at least a 1 OR an X, then score 1 additional point for tri-morbidity.</i>				Tri-Morbidity
If YES to question 49, score 1.	YES	NO	REFUSED	Prescreen Score
49. Have you had any medicines prescribed to you by a doctor that you do not take, sell, had stolen, misplaced, or where the prescriptions were never filled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If YES to question 50, score 1.	YES	NO	REFUSED	Prescreen Score
50. Yes or No – Have you experienced any emotional, physical, psychological, sexual or other type of abuse or trauma in your life which you have not sought help for, and/or which has caused your homelessness?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>PRE-SCREEN WELLNESS SUBTOTAL</b>				

Risks

Involvement in  
High Risk/  
Exploitive  
Situations

Managing  
Tenancy

Harm to Self or  
Others

Interactions with  
Emergency  
Services

Legal Issues

## B. RISKS

**SCRIPT:** I am going to ask you some questions about your interactions with health and emergency services. If you need any help figuring out when six months ago was, just let me know.

QUESTIONS				
If the total number of interactions across questions 3, 4, 5, 6 and 7 is equal to or greater than 4, then score 1.	RESPONSE		REFUSED	Prescreen Score
3. In the past six months, how many times have you been to the emergency department/room?			<input type="checkbox"/>	
4. In the past six months, how many times have you had an interaction with the police?			<input type="checkbox"/>	
5. In the past six months, how many times have you been taken to the hospital in an ambulance?			<input type="checkbox"/>	
6. In the past six months, how many times have you used a crisis service, including distress centers or suicide prevention hotlines?			<input type="checkbox"/>	
7. In the past six months, how many times have you been hospitalized as an in-patient, including hospitalizations in a mental health hospital?			<input type="checkbox"/>	
If YES to questions 8 or 9, then score 1.	YES	NO	REFUSED	Prescreen Score
8. Have you been attacked or beaten up since becoming homeless?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Threatened to or tried to harm yourself or anyone else in the last year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

If YES to question 10, then score 1.	YES	NO	REFUSED	Prescreen Score
10. Do you have any legal stuff going on right now that may result in you being locked up or having to pay fines?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If YES to questions 11 or 12; OR if respondent provides any answer <i>OTHER THAN</i> "Shelter" in question 13, then score 1.	YES	NO	REFUSED	Prescreen Score
11. Does anybody force or trick you to do things that you do not want to do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't really know, share a needle, or anything like that?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. I am going to read types of places people sleep. Please tell me which one that you sleep at most often. (Check only one.)	<input type="checkbox"/> Shelter <input type="checkbox"/> Street, Sidewalk or Doorway <input type="checkbox"/> Car, Van or RV <input type="checkbox"/> Bus or Subway <input type="checkbox"/> Beach, Riverbed or Park <input type="checkbox"/> Other (SPECIFY):			
<b>PRE-SCREEN RISKS SUBTOTAL</b>				

# Socialization & Daily Functions

Social Relations  
and Networks

Meaningful Daily  
Activities

Personal  
Administration &  
Money  
Management

Self-Care & Daily  
Living Skills

## C. SOCIALIZATION & DAILY FUNCTIONS

QUESTIONS				
<b>If YES to question 14 or NO to questions 15 or 16, score 1.</b>	<b>YES</b>	<b>NO</b>	<b>REFUSED</b>	<b>Prescreen Score</b>
14. Is there anybody that thinks you owe them money?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Do you have any money coming in on a regular basis, like a job or government benefit or even working under the table, binning or bottle collecting, sex work, odd jobs, day labor, or anything like that?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Do you have enough money to meet all of your expenses on a monthly basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>If NO to question 17, score 1.</b>	<b>YES</b>	<b>NO</b>	<b>REFUSED</b>	<b>Prescreen Score</b>
17. Do you have planned activities each day other than just surviving that bring you happiness and fulfillment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>If YES to questions 18 or 19, score 1.</b>	<b>YES</b>	<b>NO</b>	<b>REFUSED</b>	<b>Prescreen Score</b>
18. Do you have any friends, family or other people in your life out of convenience or necessity, but you do not like their company?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Do any friends, family or other people in your life ever take your money, borrow cigarettes, use your drugs, drink your alcohol, or get you to do things you really don't want to do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>OBSERVE ONLY. DO NOT ASK! If YES, score 1.</b>	<b>YES</b>	<b>NO</b>		<b>Prescreen Score</b>
20. Surveyor, do you detect signs of poor hygiene or daily living skills?	<input type="checkbox"/>	<input type="checkbox"/>		
<b>PRE-SCREEN SOCIALIZATION &amp; DAILY FUNCTIONS SUBTOTAL</b>				

# History of Housing

History of  
Housing &  
Homelessness

HOMELESSNESS

## A. HISTORY OF HOUSING & HOMELESSNESS

QUESTIONS			
<i>If the person has experienced two or more cumulative years of homelessness, and/or 4+ episodes of homelessness, then score 1.</i>	RESPONSE	REFUSED	Prescreen Score
1. What is the total length of time you have lived on the streets or in shelters?		<input type="checkbox"/>	
2. In the past three years, how many times have you been housed and then homeless again?		<input type="checkbox"/>	
<b>PRE-SCREEN HOUSING AND HOMELESSNESS SUBTOTAL</b>			

## Lower Acuity

May still need affordable housing and/or government assistance. Unlikely to need support to find, access or maintain housing beyond mainstream services.



## Moderate Acuity

A time limited approach, through the likes of Rapid Re-Housing is probably best. Usually some type of financial assistance (voucher or rent supplement) and/or case management.

## Higher Acuity

The most intensive support resource your community has available, through the likes of Permanent Supportive Housing and/or Housing First. Supports (financial and case management) will last a long time - perhaps even permanently.

# Difference Between the Full SPDAT and VI-SPDAT

- The VI-SPDAT is a *prescreen* or *triage* tool. It is looking to confirm or deny the presence of more acute issues.
- The SPDAT is an assessment tool. It is looking at the depth or nuances of an issue and the degree to which housing may be impacted.

# The Full SPDAT

- Provides baseline acuity at time of assessment and measures changes in acuity over time.
- Improves case management by providing a framework for the intervention.
- Helps indicate when housing may become unstable.
- Allows for graphing of changes over time.
- Improves system planning.

# By Comparison...

0	Has activities related to employment, volunteering, socio-recreation, etc. that provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc., occupying most times of day and most days of the week, and which provide a high degree of personal satisfaction.
1	Has some activities related to employment, volunteering, socio-recreation, etc. that provide some fulfillment intellectually, socially, physically, emotionally, spiritually, etc., occupying some times of the day and/or some days of the week, which provide a good degree of personal satisfaction.
2	Attempting activities that may provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc. but not occupying most days or most parts of any given day, and not yet providing a good degree of personal satisfaction.
3	Discussing or in early stages of attempting activities that may provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc. but not fully committed. At times disengaged from activities, and activities are not yet occupying most days, nor providing personal satisfaction.
4	Not engaged in any meaningful daily activities that provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc. Very little to no personal satisfaction.

	Yes	No	Refused
Do you have any planned activities each day, other than just surviving, that bring you happiness and fulfillment?			

- Berkman & Glass (2000). Social integration, social networks, social support, and health. In L. F. Berkman & I. Kawachi (Eds.). *Social epidemiology*, p. 137-173.
- Bowpitt, G., & Harding, R. (2008). Not going it alone: Social integration and tenancy sustainability for formerly homeless substance users. *Social Policy and Society*, 8, 1-11.
- Bowpitt, G. and Jepson, M. (2007). Stability versus progress: Finding an effective model of supported housing for formerly homeless people with mental health needs. *Social and Public Policy Review*, 2, 1.
- Carling, P. J. (1990), 'Major mental illness, housing, and supports: the promise of community integration', *American Psychologist*, 45: 8, 969-75.
- Case-Smith, J. (2012). Editorial. *OTJR: Occupation, Participation and Health*, 32, 218-219.
- [CitySpaces Consulting (2011). BC pathways out of homelessness. Regional study. *Metro Vancouver and BC Housing*. Retrieved February 15, 2014 from:  
<http://www.metrovancouver.org/planning/homelessness/ResourcesPage/PathwaysOutofHomelessness110503.pdf>]
- Eklund, M., Hansson, L., & Ahlqvist, C. (2004). The importance of work as compared to other forms of daily occupations for wellbeing and functioning among persons with long-term mental illness. *Community Mental Health Journal*, Vol. 40, 465-477.
- [Gane, M. E. (2012). Social healing: A theoretical model for the success of Housing First. Dissertation Submitted to the Temple University Graduate Board.
- Gurstein, P. and Small, D. (2005). From housing to home: Reflexive management for those deemed hard to house. *Housing Studies*, 20, 5, 717-35.

- Hodgetts, D., Stolte, O., Chamberlain, K., Radley, A., Nikora, L., Nabalarua, E., & Groot, S. (2008). A trip to the library: Homelessness and social inclusion. *Social & Cultural Geography*, 9, 933–953.
- Homeless Link (2009). Meaningful activity and older homeless people: A Homeless Link report on the learning from four projects funded by Help the Aged.
- Huxley, P. and Thornicroft, G. (2003), 'Social inclusion, social quality and mental illness,' *British Journal of Psychiatry*, 182, 289–90.
- Iannelli, S., & Wilding, C. (2007). Health-enhancing effects of engaging in productive occupation: Experiences of young people with mental illness. *Australian Occupational Therapy Journal*, 54, 285–293.
- Ilman, S. C., Spence, S., O'Campo, P. J., & Kirsh, B. H. (2013). Exploring the occupations of homeless adults living with mental illnesses in Toronto. *Canadian Journal of Occupational Therapy*, 80, 215–23.
- [Johnsen, S., & Teixeira, L. (2010). Staircases, elevators and cycles of change: 'Housing First' and other housing models for homeless people with complex support needs. Report by Crisis and the Centre for Housing Policy, UK. Retrieved from: [www.crisis.org.uk](http://www.crisis.org.uk)]

Karabanow, J. (2008). Exploring the process of young people's street exits. *American Behavioral Scientist*, 51, 772-778.

Kidd, Sean, Karabanow, J., Hughes, J., Frederick, T. (2013). Brief report: Youth pathways out of homelessness: Preliminary findings. *Journal of Adolescence* 36 (2013) 1035-1037.

Lee, Wong, & Rothbard, (2009). Factors associated with departure from supported independent living programs for persons with serious mental illness. *Psychiatric Services*, 60, 367-373.

Lomax, D. & Netto, G. (2007). Evaluation of Tenancy Sustainment Teams. Department for Communities and Local Government, London. Retrieved March 4, 2014 from Publication Archives, <https://www.gov.uk/>

Mental Health Commission of Canada (2012). Beyond housing: At Home/Chez Soi early findings report. Retrieved February 20, 2014 from:  
[http://www.mentalhealthcommission.ca/English/system/files/private/Housing\\_At\\_Home\\_Early\\_Findings\\_Report\\_Volume%202\\_ENG\\_0.pdf](http://www.mentalhealthcommission.ca/English/system/files/private/Housing_At_Home_Early_Findings_Report_Volume%202_ENG_0.pdf)

Muir, K., Fisher, K. R., Abello, D., & Dadich, A. (2010). 'I didn't just like sittin' around all day:' Facilitating social and community participation among people with mental illness and high levels of psychiatric disability. *Int. Soc. Pol.*, 39, 375-391.

Pleace, N., & Quilgar, D. (2013). Improving health and social integration through Housing First: A review. *Centre for Housing Policy & European Observatory on Homelessness, UK*. Retrieved February 14, 2014, from:  
[http://www.york.ac.uk/media/chp/documents/2013/improving\\_health\\_and\\_social\\_integration\\_through\\_housing\\_first\\_a\\_review.pdf](http://www.york.ac.uk/media/chp/documents/2013/improving_health_and_social_integration_through_housing_first_a_review.pdf)

[Price, P. (2003). Occupation-centered practices: Providing opportunities for becoming and belonging. Dissertation presented to the Faculty of the Graduate School, University of Southern California.]

[Raine, L. and Marcellin, T. *What Housing First Means?* City of Toronto, 2007.

Rebeiro, K. L. (1999). The labyrinth of community mental health: In search of meaningful occupation. *Psychiatric Rehabilitation Journal*, 23, 143-152.

Rebeiro, K. L. (2001). Enabling occupation: The importance of an affirming environment. *Canadian Journal of Occupational Therapy*, 68, 80-89.

Schultz-Krohn, (2002). A qualitative investigation of the engagement in meaningful family activities and routines by homeless parents. *Doctoral dissertation*. Saybrook Graduate School and Research Center, San Francisco, California: UMI.

Seal, M. (2005). *Resettling homeless people: Theory and practice*. Lyme Regis, Dorset: Russel House.

[Shing-Fee, N. L. (2006). The nature and meaning of occupational engagement for forensic clients living in the community. Dissertation submitted to the Graduate Department of Rehabilitation Science, University of Toronto. Retrieved February 19, 2014, from:

<http://www.tandfonline.com/doi/abs/10.1080/14427591.2009.9686650#.Ux3pcc5ChN>

Stefancic, A., Henwood, B. F., Melton, H., Shin, S., Lawrence-Gomez, R., & Tsemberis, S. (2013). Implementing Housing First in rural areas: Pathways Vermont. *American Journal of Public Health*, 103, s206-s209.

Stefancic, A., & Tsemberis, S. (2007). Housing First for Long-Term Shelter Dwellers with Psychiatric Disabilities in a Suburban County: A Four-Year Study of Housing Access and Retention. *J Primary Prevent* (2007) 28:265-279

- Thomas, Y., Gray, M., McGinty, S., & Ebringer, S. (2011). Homeless adults engagement in art: First steps towards identity, recovery and social inclusion. *Australian Occupational Therapy Journal*, 58, 429-436.
- Townley, G. E. (2012) Examining community integration of individual with psychiatric disabilities residing in supported and non-supported housing. *Doctoral Dissertation*, University of South Carolina.
- Townsend, E. A., & Polatajko, H. J. (2007). Glossary. In E. A. Townsend & H. J. Polatajko, *Enabling occupation II: Advancing an occupational therapy vision for health, well-being, & justice through occupation* (pp. 364-374). Ottawa, ON: CAOT Publications ACE.
- Tryssenaar, J., Jones, E. J., & Lee, D. (1999). Occupational performance needs of a shelter population. *Canadian Journal of Occupational Therapy*, 66, 188-196.
- Tsai, J., Mares, A. S., & Rosencheck, R. A. (2012). Does housing chronically homeless adults lead to social integration? *Psychiatric Services*, 63, 427-434.
- [Tsemberis & Eisenberg, (2000). Pathways to Housing: Supported housing for street-dwelling homeless individuals with psychiatric disabilities. *Psychiatric Services*, 51, 487-93.

Wilcock, A. (2006). *An occupational perspective of health* (2<sup>nd</sup> ed.). Thorofare: Slack Inc.

Wong, Y. I., Hadley, T. R., Culhane, D. P., Poulin, S. R., Davis, M. R., Cirksey, B. A., & Brown, J. L. (2006). Predicting staying in or leaving permanent supportive housing that serves homeless people with serious mental illness. Report prepared for US Department of Housing and Urban Development. M. Davis and Company, Inc. and University of Pennsylvania Center for Mental Health Policy and Services Research, Philadelphia, PA.

Wong, Y. I., & Solomon, P. L. (2002). Community integration of persons with psychiatric disabilities in supportive independent housing: A conceptual model and methodological considerations.

Yanos, Barrow & Tsemberis (2004). Community integration in the early phase of housing among homeless persons diagnosed with severe mental illness: Successes and challenges. *Community Mental Health Journal*, 40, 133-150.

Yanos, Felton, Tsemberis & Frye (2007). Exploring the role of housing type, neighbourhood characteristics, and lifestyle factors in the community integration of formerly homeless persons diagnosed with mental illness. *Journal of Mental Health*, 16, 703-717.

Yanos, Stefancic, & Tsemberis, (2012). Objective Community Integration of Mental Health Consumers Living in Supported Housing and of Others in the Community. *Psychiatric Services*, 63, 438-44.

Zimolag & Krupa, (2009). Pet ownership as a meaningful community occupation for people with serious mental illness.

# Independent Testing

- Strong inter-rater reliability.
- Positive summative evaluation.
- Positive outcome evaluation.
- Determined by government to be appropriate for various departments/ministries.
- Presented at peer-reviewed conferences by evaluators.



[idejong@orgcode.com](mailto:idejong@orgcode.com)



[facebook.com/orgcode](https://facebook.com/orgcode)



[Iain De Jong](#)



[orgcodemobile](#)



[orgcode.com](http://orgcode.com)



[@orgcode](#)